

DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES



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STATE OF MONTANA

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DEVELOPMENTAL DISABILITIES PROGRAM
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May 22, 2008

To: Lorrie Merril, Executive Director
Deloris Pribyl, Board Chairman

From: Cherylyn Wilson, Quality Improvement Specialist

Subject: Comprehensive Evaluation for FY 08

Enclosed is the Quality Assurance Evaluation for FY 08. It encompasses the contracted services of residential habilitation (group homes and supported Living), day habilitation and community supports (one enrolled consumer who purchases respite and transportation services). As in the last review, the table shows the areas of review with any pertinent findings noted in the comment sections, followed-up with quality assurance observation sheets and appropriate appendices. As a result of this review, there are five follow-up issues which require your attention with responses due by June 10, 2008.

Your agency has once again proven its commitment to the Big Sandy family of consumers and staff. Consumer interviews confirm that the individuals you support are happy and comfortable with the services provided. Upon entering any of the residential sites, the feel is warm and home like. Photographs of each individual on outings and activities line the walls and bring pride to both the consumers and the staff that work with them. The dedication of the executive director and the Board of Directors in pursuing a grant for building a new day activity center in order to meet the therapeutic needs of the individuals you serve is commendable.

Based on my interactions with your agency this past year, as well as the results of this evaluation, it is my opinion that Big Sandy Activities provides a level of excellence in services that is built out of genuine care and concern for the individuals living in your community. Your staff's dedication and willingness to meet the challenges that face them is apparent in the services provided and they should be proud of the standard they have set.

Our office will be re-assigning staff effective June 15, 2008. Your new Quality Improvement Specialist will be Joe Davidson whom I am certain will be a great addition to your service family. It has been my distinct pleasure to serve your agency and you have my heartfelt appreciation for your honesty, integrity and commitment to the people we serve.

**Comprehensive Evaluation
Big Sandy Activities
142 Great Northern Ave.
PO Box 369
Big Sandy, MT 59520**

FY 2008

*As Evaluated by:
Cherilyn Wilson, QIS
Region II Developmental Disabilities
201 1st Street South, Suite 3
Great Falls MT 59405*



Agency: Big Sandy Activities
Evaluators: C. Turner, J. Davidson

DESK REVIEW:	Appendix or QAOS
<p>Accreditation:</p> <p>Accreditation is no longer required by the state contract.</p>	
<p>Significant Events from the Agency:</p> <p>Big Sandy Activities has had another busy year with many exciting outings; camping, fishing, special olympics and karaoke to name a few. Consumers at BSA state that they are very happy with the services and supports they receive. Staff at BSA are very dedicated to on going training and have gone above and beyond with thier College of Direct support modules, and additional trainings they have been offered and requested specific to thier population. Of note this year is the completion of their estimates and plans to apply for a grant that would expand thier opportunities to provide active theraputic activities to thier individuals. Big Sandy Activities in general caters to many highly medically needy individuals. This population has many theraputic recommendations for physical and occupational therapy follow through. They have a certified massage therapist on staff that is qualified to provide this follow-up however they currently do not have an appropriate space for this service to be provided. It would be very beneficial to these consumers for this grant to be achieved and BSA's dedication to working toward this goal is commendable. Also of note in this time of ports and transitions, BSA's consumer census has been 100% consistent for several years. This demonstrates the consistant services and supports that are provided leading to individuals who are very content with their home and quality of life.</p>	QAOS08-1
<p>Agency Internal Communications Systems:</p> <p>Big Sandy Activities has good internal communications systems. They hold weekly incident management meetings in conjunction with their health assessment, quality assurance and management team meetings. Group home, supported living, and day center staff meetings are held separately one time per week, "all staff" meetings are held once every 6 to 12 weeks. In addition daily health care checklists and notebooks and written in daily and travel between the day center and residential sites.</p>	
<p>Policies and Administrative (DDP) Directives</p> <p>Over the past year, (as always), there have been a number of DDP directives and new policies that have implimented. Big Sandy Activities communicates openly and honestly with the regional and central offices asking questions and seeking clarification as needed. Staff at BSA are very open and cooperative. When new requirements and changes have been requested, BSA has implimented and made the changes part of thier operational procedures. In additional Lorrie Merrill, ED was instrumental in setting up the Region II "what the heck's going on" meeting which assisted the entire region's providers to communicate openly regarding the changes that have occured recently.</p>	

Comprehensive Evaluation

6/6/2008

Agency: Big Sandy Activities

Evaluators: C. Turner, J. Davidson

DESK REVIEW:	Appendix or QAOS
<p>Fiscal (audits, cost plans, invoices):</p> <p>An independent auditors report was sent on February 4, 2008 from Galush, Higgins, and Galusha stating that "the changes in its net assets and its cash flows for the years then ended in conformity with the accounting principles generally accepted in the United States of America. No concerns were noted in the auditors report. BSA provided a one month sample of their staffing and invoicing documentation for this review. Staffing appears to be appropriate for the cost plans and invoices are submitted in a timely and accurate fashion. BSA has several nursing grants in place to support their specialized services.</p>	
<p>Licensing:</p> <p>Community Home Licensing was evaluated by Jan Schindele September 4, 2007, stating that BSA has maintained full compliance with licensing requirements for each home. Licensing includes the co-ed group home effective September 1, 2007 to August 31, 2008 for 9 adults, as well as the Women's Group Home licensed for 6 female adults effective for the same dates. Fire Marshal investigation and report was completed on July 31, 2007 noting no violations. Sanitation report was completed on Aug 7, 2007 with no violations noted.</p>	

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DESK REVIEW:	Appendix or QAOS
Quality Assurance Observation Sheets: (trends from past year) Since the previous years comprehensive evaluation there have been no further quality assurance observation sheets submitted. All of the previous findings were corrected immediately and responded to in a timely manner. No issues identified in the previous years QA evaluation were identified as recurring this year.	
Medication Errors: (trending from past year) Medication errors for this year have been a total of 21. These medication errors include late and missed medications or dropped pills. No adverse reactions have occurred due to medication errors. No medication error has been critical. When medication errors occur, the BSA RN is contacted and follow-up notifications are made in a timely manner. Big Sandy Activities does a great job of getting their staff medication administration certified and has relatively few medication related incidents.	
Incident Management: (summary trends, steps to address trends, investigation summaries) Big Sandy Activities incident management team meets weekly as needed to review incidents. Critical incidents this year have included two incidents of choking, 3 hospitalizations, and one self injurious behavior. No trends in incidents have been identified. Investigation summaries are completed in a timely manner and are comprehensive in nature. Recommendations made by the investigator and the incident management team are followed through consistently. New policy regarding incident management went into effect in July 07 which states that specific assurances need to be in personnel policy. These have been added to BSA's incident management policy. Thank you for your thoroughness!	

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Staff Related:										Appendix or QAOS
Evidence Found of Orientation Training (mark 'yes' if present, 'no' if not present)										
staff initials	cg	LS	TB	SE	JM					
yes/no	yes	yes	yes	yes	yes					
Note where evidence found: training records at the main office.										
Evidence Found DDCPT or equivalent:										
staff initials										
yes/no										
Note where evidence found: BSA is not currently running DDCPT or equivalent but is completing additional CDS modules										
Evidence of Criminal Background Checks:										
staff initials	CG	LS	TB	SE	JM					
yes/no	yes	yes	yes	yes	yes					
Note where evidence found: Personel records personnell files, staff training records, agency employment application										
Evidence of Staff Survey:										
staff initials										
yes/no										
Note where evidence found: BSA does not conduct formal staff surveys at this time. This was a requirement for accreditation previously. As staff surveys do provide a wealth of information it is recommended.										
Comments: (regarding staff hiring, screening, training, supervision)										
BSA has gone beyond the required College of Direct Support modules and has required additional training for their staff. BSA shows their dedication to on going training by attending additional trainings throughout the region when they become available. They have requested specialized training on additional topics such as PSP development, abuse reporting, fire safety, and health related issues from outside professionals as well.										

Recommend

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Staff Related:								Appendix or QAOS
Evidence Found of Staff Training: (mark 'X' if present, 'no' if not present)								
staff initials	CG	LS	TB	SE	JM			
1st aid/CPR	yes	yes	yes	no	yes			
Abuse Prevention	yes	yes	yes	yes	yes			
Client Rights	yes	yes	yes	yes	yes			
Incident Reporting	yes	yes	yes	yes	yes			
Confidentiality	yes	yes	yes	yes	yes			
IP/PSP Process	yes	yes	yes	yes	yes			
CDS complete w/in 6 months of hire date?	yes	yes	yes	New	yes			
Medication Cert	yes	yes	yes	no	no			
Note where evidence found: personnel and staff training records								
Comments: <div style="border: 1px solid black; padding: 10px; min-height: 80px;"> Staff training and orientation is very complete and comprehensive. SE needs fist aid and CPR. ARM 37.100.322 states this must be completed within the first 30 days of employment. </div>								

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Agency: **Big Sandy Activities**

Evaluators: **C. Turner, J. Davidson**

Note Site Reviewed:

IP Checklist: check if evidenced		Note Site Reviewed:							Appendix or QAOS
Consumer Initials		GH	GH	GH	SL	SL		CSP	
On Site	Consumer/Family Survey	yes	yes	yes	yes	yes		yes	
	PSP/IP Doc Avail to all Staff	yes	yes	yes	yes	yes		yes	
	IPP/Actions Implemented	yes	yes	yes	yes	yes		yes	
	Data for IPP/Actions	yes	yes	yes	yes	yes		yes	
	Data Internally Monitored	yes	yes	yes	yes	yes		yes	
	Self Medication Objective	addressed	addressed	addressed	yes	addressed		addressed	
	Consumer informed of grievance procedure	no	no	no	no	no		no	
	SL consumer choice of SL staff	NA	NA	NA	yes	yes		NA	
	Rights Restrictions	NA	NA	NA	yes	NA		NA	
CMIPP	PSP/IP Checklist	yes	yes	yes	yes	yes		yes	
	PSP/IP Annually?	yes	yes	no	yes	yes		yes	
	Individual Needs Addressed?	yes	yes	yes	yes	yes		yes	
	Assessment Based?	yes	yes	yes	yes	yes		yes	
	Quarterly Reports?	yes	yes	yes	yes	yes		yes	
	Incident Reports Addressed?	yes	yes	yes	yes	yes		NA	
	Behavioral Supports Addressed?	na	yes	yes	yes	yes		NA	
	Functional Analysis Needed?	na	na	na	complete	NA		NA	
	Free from Aversive Procedures?	yes	yes	yes	yes	yes		yes	
Comments: (regarding service planning and delivery) PJ- previous IP dated 5/31/06; current PSP dated 8/22/07 PSP was delayed by the request of the family. Consumer grievance procedure is listed in the consumer rights that are reviewed annually however there is currently no written grievance procedure and it is not reviewed "at least every six months" as stated in the ARM. In addition having posted phone numbers and pictures of people that consumers could contact if they had a grievance or complaint would be beneficial. Internal monitoring of actions and data collection appears to be a strength for BSA as actions are amended and changed as needed for the benefit of the consumer. Quarterly reports are completed on time and are an accurate reflection of the status of the actions.									QAOS 08-3 QAOS 08-4

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Make note of site reviewed

Residential Site Checklist: check if evidenced or mark data as appropriate

Appendix
or QAOS

Site Name	co-ed	womens	center						
H e a l t h S a f e t y	Bathing procedures posted	yes	no	NA					
	Clean/Sanitary Environment	yes	yes	yes					
	Egress	yes	yes	yes					
	Hot Water Temps	124	120	118					
	Emergency Assistance	yes	yes	yes					
	Fire Extinguishers/smoke Detectors	yes	yes	yes					
	1st Aid/CPR Supplies Accessible/Available	yes	yes	yes					
	PRN Medications	no	no	yes					
	Medication Procedures	yes	yes	yes					
	Medication Locked Storage	yes	yes	yes					
	Medication Administration Records	yes	yes	yes					
	Staff Ratios or ICP staffing	yes	yes	yes					
	Awake Overnight Staff	yes	yes	NA					
	Adequate Supplies	yes	yes	yes					
	Storage of Supplies	yes	yes	yes					
	Free from aversive procedures?	yes	yes	yes					
D a i l y	Weekly integrated activities	yes	yes	yes					
	House or Site Rules	yes	yes	yes					
	Opp for choice, self determination	yes	yes	yes					
	Meal Prep, Mealtime	yes	yes	yes					
	Engagement in Daily Life	yes	yes	yes					
	Participation in Daily Living Skills	yes	yes	yes					
	Daily Leisure Opportunities	yes	yes	yes					
	Staff Trained in Individual Specifics	yes	yes	yes					
Comments: Bathing procedure was not posted for the one individual in the women's home that has siezures. Bathing protocol was available in the home in the PSP book, but did not state that staff needed to be present during bathing. The protocol was corrected and posted before leaving the site. All bathing protocols were posted at the co-ed home. Water temperatures were slightly high at the co-ed home. This was identified in the sanitation report as well. PRN protocols need to be updated. The form presently used states that a rectal exam should be completed prior to giving a PRN for constipation, Through interview this is not being practiced but should not be on the protocol as this is not a direct care staff duty.									

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Residential Site Checklist: check if evidenced					Appendix or QAOS			
Site Name	new	old	work					
T r a n s p o r t a t i o n	Driver Orientation Program	yes	yes	yes				
	Wheelchair tie downs	yes	yes	na				
	Wheelchair Lift	yes	yes	na				
	Driver's Licenses	yes	yes	yes				
	Emergency Supplies	yes	yes	yes				
	Fire Extinguisher	yes	yes	yes				
	Transportation Log	yes	yes	yes				
	Scheduled Maintenance Program	yes	yes	yes				
	Training--Staff Doing Maintenance Checks	yes	yes	yes				
	Procedures for Timely Repairs	yes	yes	yes				
	MDT inspection on file (MDT vehicles only)	na	na	na				
	Comments: All areas of review for transportation were adequate. No concerns noted in this area. BSA is enjoying having the new van that allows more individuals in wheelchairs to go on outings and it appears this has been used a lot over the previous year.							QAOS08-7
Comments: BSA does submit transportation bills to medicaid transportation for medically related transportation costs. Documentation was available on site to support this practice.								

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Staff Survey: check if 'met', 0 if 'unmet'								Appendix or QAOS
Staff Initials		JB	CG	SE	DL			
A b s e	Allegations are reported to? (APS)		met	met	met			
	Do you notify Supervisor first? (NO)	met	met	met				
	Steps to take if abuse is discovered?	met		met	met			
	Comments:							
L i b r a r y	Suspect theft of gloves, steps to take?	met						
	IP/PSP requests Doctors appt		met		met			
	No jacket, -25 consumer wants to leave	met		met	not met			
	Review Rts Restriction		met	met				
Comments: DL stated she would let the consumer walk								
b m p	describe consumer behaviors		met	met	met			
	staff response to behaviors by plan	not met	not met	met				
	list proactive or environmental strategies				met			
Comments: JB stated that BD is sent to his room when he becomes upset. This could be construed as an exclusionary timeout. After prompting staff did not know what a behavioral protocol was. Recommend that an interaction protocol be written to consistently meet his needs for quiet time in a positive manner without misinterpretation. Additional training on behavioral protocols for staff is also recommended.								QAOS08-8
O b s e r v e r	former employee wants info	met	met		met			
	what is consumer information?			met				
	training to meet health and safety needs?		met	met	met			
	emergency evacuation procedures?	met						
Comments:								

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Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer								Appendix or QAOS
Staff Initials		JB	CG	SE	DL			
Medication	describe procedure to assist with meds	met	met					
	if med is unavailable?			met	met			
	if gave wrong med?		met		met			
	if moving to a new place or gets new med?							
	requirement to assist with meds?	met		met				
	describe PRN or OTC is to be given		met		not met			
	what constitutes a med error?	met	met					
Comments: DL stated she would just read the bottle and know when to give it based on knowing the consumer "probably", did not know to check a PRN protocol or to call the RN if in doubt.								
ERC	steps to avoid power struggles		met	met	met			
	how to respond to someone who is upset	met		met				
	what is you start to lose control?	met	met		met			
	Comments:							
Documentation	when do you fill out an incident report?			met	met			
	notifications for ER?	met	met	met				
	consumer to consumer incidents		met		met			
	who writes the IR?	met	met	met				
	Comments:							

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Consumer Questionnaire (used by QIS). Check if evidenced. 0 if not asked. Bolded questions are mandatory								Appendix or QAOS
Consumer initials		CH	KS	NF	TB	RC	DC	
Consumer has/shows ID card? (if PSP documents this is not applicable, mark NA)		0	0	0	0	0	0	
consumer	Do you have nice staff at home/work?	Yes	susan	yes	yes	Lorrie	yes	
	Is anyone mean to you at home/work?	NO		no	no	0	no	
	Do you like where you live/work?	YES	yes	yes	yes	yes	yes	
	Are you ever afraid of anyone?	NO	no	no	no	no	no	
	Someone hits/hurts you, who can you tell?	Lorrie	Lenore/Lar	LM/HP/LB	LM/Larry	not sure	staff	
	Does anyone talk to you about this?	no	no	LM	LM/ PW	don't know	staff	
	Can you get help when you need it?	YES	0	yes	yes	0	yes	
	from staff?	yes	0	yes	yes	0	Pastor	
	from Case Manager?	sometimes	0	yes	yes	0	Pastor	
	Can you get your own food/drink?	no-locked	yes	yes	staff helps	0	yes	
	Do people come into your house/room w/o knocking/permission?	0	0	no then	no	0	0	
	Do staff ever take things from you?	0	0	sometimes	no	0	0	
	Can you get rides to places you need to go?	0	0	no	no	0	no	
	Rides to the places you want to go?	0	0	yes	y	0	0	
	Who is your Case Manager?	Pam	Pam	Pam	Pam	Pam	Pam	
Does s/he talk to you about waiver services?	yes	yes	yes	yes	yes	yes		
Does s/he help you get what you need?	no	yes	yes	yes	yes	yes- "food"		
Comments: RC and DC individually stated that they would call staff members in an emergency neither are able to use 911. Overall individuals receiving services and supports from Big Sandy Activities stated they were very happy and comfortable with their staff and the care they are receiving. Of note, several individuals stated "Addie" was one of their favorite staff. This is noted because Addie is the massage therapist that follows up with physical and occupational therapy recommendations at the day center. The individuals in service enjoy the one on one time they have with Addie while she is able to follow through with a very necessary therapeutic active treatment.								

Provider: Big Sandy Activities
 Eval Date: April 14-15, 2008

consumer:	GW	Hours per ICP:	171.6/mo res plus 26.41 RN					
Actions per PSP				Evidence support provided consistently?				
Monitor and fill Brad's nutrition suppliment bag as Dr. orders/protocol				MAR sheets, protocol Available, scheduling and nurdsing grants, quarterly's and logs				
RN will maintain and clean nutrition suppliment bag				MAR sheets, scheduling and nurdsing grants, quarterlies and logs				
RN will administer Brad's meds and extra hydration per dr. orders				MAR sheets, scheduling and nurdsing grants, quarterlies and logs				
BSA will give Brad a warm bath daily (amended to "as written in protocol)				scheduling, protocol available, quarterlies and logs				
Assist will daily living skills and document daily				checklist, logs, quarterlies				
monitor and document siezures				seizure reports, health care checklist, logs,				
transportation provided				Transportation logs, medical appointments				
Aroma therapy in his room every night				logs, checklist, observation of materials available, staff interview, quarterlies				
sensory stimulation nightly (visual, olfactory, auditory, kinesthetic methods)				logs, checklist, observation of materials available, staff interview, quarterlies				
reposition Brad in bed every 2 hrs and document				logs in home, health care checklist, quarterlies				
BSA director will contact dentist for permission to try tastes by 9/9/07				7/26/07 letter sent, 1/25/08 Dentist did not want to respond				
BSA director will contact Dr. to discuss tastes by 9/9/07				on hold				
team will develop a list of tastes for approval by 9/30/07				on hold				
team will develop protocol based on recommendations for taste by 10/15/07				on hold				
Brad will utilize his sense of taste.				on hold				
consumer:	GW	Hours per ICP:	53.96hrs/mo day plus 26.41 RN					
Actions per PSP				Evidence support provided consistently?				
provide sensory stimulation involving hearing, sight, smell, and touch				documented on daily opportunities of actions log.				
Provide a massage a minimum of 1x/week				Massage is being implimented 6-7 times per month and documented				
take Brad to the City Pool 3x by 9/1/07 weather permitting				amended on 7/07 completed on 9/6/07				
do an outside activity 3x/week weather permitting				often not 3x/ week however it does appear whenever weather is appropriate.				
contact the PT for recommendations by 7/6/07				June 07 completed, contacts documented				
develop an implimentation strategy for PT follow-up				July 07 ROM therapy protocol implimented and signed by PT				
Schedule a date for Brad to visit Addie's pig farm by 6/5/08				on hold for now				
transport to the pig farm				on hold for now				
given the opportunity to hold a baby pig by 6/5/08				on hold for now				
schedule "animal days" at home 1x/quarter				logs, checklists, quarterlies				
pet owners bring pets and supervise/ Brad will interact with several animals.				logs, checklists, quarterlies				
Protocols:				Evidence staff clearly understood and were able to implement protocol?				
PT				written and implimented by qualified staff, signed by PT				
Bathing				Posted				
feeding tube				in PSP, implimented by RN, signed by physician				

Provider: Big Sandy Activities
 Eval Date: April 14-15, 2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer:	AM	Hours per ICP:	84hrs/ mo day 531.5 hrs/ month res					
Actions per PSP				Evidence support provided consistently?				
Assist with Daily Living Skills and document daily				daily health care checklist, logs, opportunities for actions				
offered the opportunity to work on a puzzle 1x/ wk document with refusals				documented at least 1x per week				
schedule a hair cut every 2 months				documented on logs				
4 outings per month 2 in town 2 out of town				documented regularly				
Shopping with staff 1x/ mo				documented on logs monthly				
Will go on a short vacation				planning for this summer				
will go on 2 picnics with the day center				planning for this summer				
will go sledding with the day center 1x/ yr				planning for coming winter months				
will go bowling one time this year				not completed as of date of review				
will discuss with landlords repairing his bathroom by 4/11/08				not completed as of date of review				
staff will find a repairman for remodel by 4/11/08				not completed as of date of review				
Check into using IIM account for repairs by 6/11/08				not completed as of date of review				
obtain an estimate by 6/11/08				not completed as of date of review				
bathroom will be repaired by 9/15/08				not completed as of date of review				
Given a whirl pool bath 2x/ month (1x center staff/1x by the home staff)				typically completed more than 1x per month				
ROM at the center 1x/ week				offered at least 1x per week and documented. Refusals are rare.				
walk with his walker for one minute 2x/week				offered daily and documented on logs at the center				
Assist with medications per med protocol and document				MAR sheets and protocols available and complete				
Assist Abe with transportation				transportation logs and checklists at home. Activities documented.				
monitor health and safety concerns per checklist daily				checklist implemented and recorded daily.				
Abe will be weighed monthly with results posted at center and home				weight is being monitored monthly.				
Abe will purchase flowers and planters for his yard by 5/30/08				not completed as of date of review				
Abe will water flowers in his yard as necessary throughout the growing season				not completed as of date of review				
Abe will use a carpet sweeper at home 2x/ week				documented on residential checklist and opportunities for actions log				
Abe will mop floors at the center 3x/ week				documented on center checklist and opportunities for actions log				
Abe will wash a vehicle at the center 1x/ month during the summer				not completed as of date of review				
Protocols:								
Bathing				documented in PSP and posted				
ROM				documented at the center and protocol understood by qualified staff				
Meds				protocols in place MARs sheet completed daily.				

Provider: Big Sandy Activities
 Eval Date: April14-15, 2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer:	PJ	Hours per ICP:	212.9/mo res 53.97/mo day						
Actions per PSP				Evidence support provided consistently?					
assist Pam with her Daily living skills including bathing protocol daily res and day				daily living skills checklist					
provide transportation res and day				transportation logs, home and center documentation					
Try an antacid after meals to counter irritability				attempted prilosec and nexium.					
assist with medications and document				MAR sheets,					
BSA's RN will have meds reviewed by her psychiatrist by 10/23/07				completed 9/25/07					
RN to check into buying high top shoes for Pam by 10/01/07				completed called 8/07					
assist with purchase of shoes by 11/1/07 if able to be afforded				completed 10/11/07					
staff will use gait belt to assist to walk outdoors 3x/ week weather permitting				completed consistently each month					
Assist Pam to purchase a small stress ball by 10/23/07				was given one and did not need to purchase..completed					
Pam will receive a massage 1x/ week				typically more than 1x per week					
given a bubble bath 2x/ month				completed consistently 2-3x per month					
offered opportunity to use her pool 8x/ yr weather permitting				no opportunity due to weather					
assist Pam to purchase a foot bath by 8/21/07				9/16/07 completed					
assist in soaking feet 3x/ month				used for the first few months, has not been used since November					
Staff will plan a trip for Pam to Glendive by 9/22/07				due to health issues this has not occurred					
Pam will go on an overnight trip to Glendive by 10/31/07				due to health issues this has not occurred					
Pam will go on a picnic 2x/yr res and 2x/yr day weather permitting				has gone on 2 picnics so far this year.					
Protocols:				Evidence staff clearly understood and were able to implement protocol?					
medication				observation during the review,					

comments: Please review actions and amend or discontinue ones that are no longer necessary.

Provider: Big Sandy Activities

Eval Date: April 14-15, 2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer:	DW	Hours per ICP:	Community Supports Agreement					
Actions per PSP (IP in this case)				Evidence support provided consistently?				
Continue to receive respite care for 8 hrs per week (BSA responsible)				documentation kept in main office				
attend a sign language class in Great Falls 1x/wk (family responsible)				documentation kept in main office for transportation reimbursment				
Protocols:				Evidence staff clearly understood and were able to implement protocol?				
No protocols necessary.								

Provider: BSA

Eval Date: April 14-15, 2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer NF	Hours per ICP:	68/mo. Day 508/mo residential					
Actions per PSP			Evidence support provided consistently?				
Cook breakfast 5x per week			documented on data sheets: Only completed 2-3x /week in march reg. In April				
set up medication 1x per month			completed documented in logs				
work on 6 new recipes per month			completed documented in logs				
exercise 3x per month 15 min each action			completed documented in logs				
work on quilt 2x per month			completed documented in logs				
whirlpool 2x per month			not being documented if completed				
computer work 1x/week			not being documented if completed				
study/prepare for drivers exam 30 minutes per week			dropped				
money management skills 4 hours/month			not being completed 4 hrs per month and documented				
Karaoke 1x/month			completed documented in logs				
12 addition fun activities outside of home			completed documented in logs				
1 planned road trip			completed documented in logs				
fishing 2x this summer			on hold				
attend counseling as recommended by therapist.			attending as recommended				
2 picnics with center this year			no opportunity yet this yr				
go sledding 1x this year			no opportunity yet this yr				
camping 1x per year			no opportunity yet this yr				
treadmill 1x/wk per protocol			completed documented in logs				
massage offered 2x per month			completed documented in logs				
swimming 6x per year			no opportunity yet this yr				
Daily living skills tracked daily			completed documented in logs				
Protocols:			Evidence staff clearly understood were able to implement protocol?				
Make 6 new recipes			protocol in the home staff descibes clearly and documents				
setting up medications			protocol in the home staff descibes clearly and documents				
monthly budget			protocol in the home staff descibes clearly and documents				

Comments: quarterly report states action for breakfast is done daily and documented for March. Documentation does not match this report.

Provider: Big Sandy Activites

Eval Date: April 14-15, 2008

consumer:	IB	Hours per ICP:	197/mo res. 54/mo Day						
Actions per PSP				Evidence support provided consistently?					
Daily living skills tracked/ documented daily				data collection sheets available					
Transportation for medical, social, and day activities				transportation logs, daily health care checklist and data collection sheets					
Spend 15 days at his mothers home				documented on daily logs for visits					
send a letter to his mother 1x per mo				objective was dropped due to lack of interest. IB calls frequently.					
Explore several options for long distance phone capability by 11/1/07				documentation of several options explored. Using phone cards presently					
attend Karaoke 6x/yr				7x documented so far this PSP yr.					
go fishing 2x per yr				has completed 3x this year					
Enjoy 2 picnics				1x thus far others scheduled for summer months.					
8 impromptu activities outside his home this yr				multiple activities documented for each month.					
Go to TWG 1x per month				IB documentation shows several visits per month.					
medications per med protocol				MAR sheets and protocols reviewed					
Have a swallowing evaluation				completed 9/12/07					
hand flexibility re-evaluated by PT				completed					
utilize PT recommendations				completed, PT recommends only Addie should complete hand exercises.					
help in kitchen 2x/ mo at day 2x/week at home				documentation in both home and center records					
sort silverware 1x/ mo at day 2x/week at home				documentation in both home and center records					
assist with laundry 1x/mo at day 2x/week at home				documentation in both home and center records					
Take out the trash 2x/week at home				documentaiton in opportunities for actions					
put away commodities 1x/quarter				no commodities received, no opportunity					
fill pop machine 4x/yr				dropped as of 10/24/07, no more pop machine					
shred paper 4x/mo				not completed 4x per month 1-3x per month completed					
offered massages 2x/week				recieves consistently 2x/ mo. Documentation at center					
Protocols:				Evidence staff clearly understood and were able to implement protocol?					
Bathing				document in PSP, posted at the home					

comments: Please review actions and amend or discontinue ones that are no longer necessary.